

**AMENDMENT TRANSMITTAL FORM**

**VIA EFS**  
**Commissioner for Patents**  
**Alexandria, VA 22313-1450**

**Customer No.: 23696**  
**Attorney Docket No.: 030645**  
**In Re Application of: Sanjiv Nanda**  
**Serial Number: 10/809m997**  
**Filed: March 26, 2004**  
**Examiner: Ajay, Joel**  
**Group Art Unit: 2617**  
**Conf. No.: 8496**

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	_30	26		x \$50 =	\$200.00
Independent**	_4	4		x \$200 =	\$
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No				\$360	\$
EXTENSION FEES			<input type="checkbox"/> One Month	\$120	\$
			<input type="checkbox"/> Two Months	\$450	\$
			<input type="checkbox"/> Three Months	\$1020	\$
TERMINAL DISCLAIMER				\$130	\$
				<b>TOTAL FEE</b>	<b>\$200.00</b>

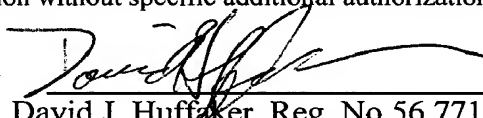
\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$200.00  
 The Commissioner is hereby authorized to charge payment of any additional fees or extra claims that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: April 12, 2007

Signature

  
 David J. Huffaker, Reg. No 56,771  
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